## **APPLICATION DATA SHEET**

# **Application Information**

Application Number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	No
Number of Copies of CRF::	
Title::	PARKING ASSIST APPARATUS
Attorney Docket Number::	000409-104
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	2
Small Entity?::	No

Latin Name::	
Variety Denomination Name::	
Petition Included?::	No ·
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Yuu
Middle Name::	
Family Name::	TANAKA .
Name Suffix::	•
City of Residence::	Aichi-gun
State or Province of Residence::	Aichi-ken
Country of Residence::	Japan
Street of Mailing Address::	3-16-14, Shirotori, Togo-cho
City of Mailing Address::	Aichi-gun

State or Province of Mailing Address:: Aichi-ken

Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Yoshifumi
Middle Name::	
Family Name::	IWATA
Name Suffix::	
City of Residence::	Anjo-shi
State or Province of Residence::	Aichi-ken
Country of Residence:	Japan
Street of Mailing Address::	2-1-1-304, Jonan-cho
City of Mailing Address::	Anjo-shi
State or Province of Mailing Address::	Aichi-ken
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Akira
Middle Name:	

Family Name::	MATSUI
Name Suffix::	
City of Residence::	Toyota-shi
State or Province of Residence::	Aichi-ken
Country of Residence:	Japan
Street of Mailing Address::	c/o TOYOTA JIDOSHA KABUSHIKI KAISHA, 1, Toyota-cho
City of Mailing Address::	Toyota-shi
State or Province of Mailing Address::	Aichi-ken
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	471-8571
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Hisashi
Middle Name::	
Family Name::	SATONAKA
Name Suffix::	
City of Residence::	Susono-shi
State or Province of Residence::	Shizuoka-ken
Country of Residence::	Japan
Street of Mailing Address::	c/o TOYOTA JIDOSHA KABUSHIKI KAISHA, 1, Toyota-cho

City of Mailing Address::

Toyota-shi

State or Province of Mailing Address:: Aichi-ken

Country of Mailing Address::

Japan

Postal or Zip Code of Mailing

Address::

471-8571

**Applicant Authority Type:**:

Inventor

Primary Citizenship Country::

Japan

Status::

**Full Capacity** 

Given Name::

Yuichi

Middle Name::

Family Name::

KUBOTA

Name Suffix::

City of Residence::

Okazaki-shi

State or Province of Residence::

Aichi-ken

Country of Residence::

Japan

Street of Mailing Address::

c/o TOYOTA JIDOSHA KABUSHIKI KAISHA, 1,

Toyota-cho

City of Mailing Address::

Toyota-shi

State or Province of Mailing Address:: Aichi-ken

Country of Mailing Address::

Japan

Postal or Zip Code of Mailing

Address::

471-8571

Applicant Authority Type::	Inventor	
Primary Citizenship Country::	Japan	
Status::	Full Capacity	
Given Name::	Tomohiko	
Middle Name::		
Family Name::	ENDO	
Name Suffix::		
City of Residence::	Toyota-shi	
State or Province of Residence::	Aichi-ken	
Country of Residence::	Japan	
Street of Mailing Address::	c/o TOYOTO JIDOSHA KABUSH Toyota-cho	IKI KAISHA, 1,
City of Mailing Address::	Toyota-shi	
State or Province of Mailing Address:	: Aichi-ken	
Country of Mailing Address::	Japan	
Postal or Zip Code of Mailing Address::	471-8571	
Applicant Authority Type::	Inventor	
Primary Citizenship Country::	Japan	
Status::	Full Capacity	
Given Name::	Hideyuki	
Middle Name::		
Family Name::	IWAKIRI	
Name Suffix::		
P	age # 6	Initial 03/26/04

City of Residence::

Tajimi-shi

State or Province of Residence::

Gifu-ken

Country of Residence::

Japan

Street of Mailing Address::

c/o TOYOTO JIDOSHA KABUSHIKI KAISHA, 1,

Toyota-cho

City of Mailing Address::

Toyota-shi

State or Province of Mailing Address:: Aichi-ken

Country of Mailing Address::

Japan

Postal or Zip Code of Mailing

Address::

471-8571

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Japan

Status::

**Full Capacity** 

Given Name::

Toru

Middle Name::

Family Name::

**SUGIYAMA** 

Name Suffix::

City of Residence::

Toyota-shi

State or Province of Residence::

Aichi-ken

Country of Residence::

Japan

Street of Mailing Address::

c/o TOYOTA JIDOSHA KABUSHIKI KAISHA, 1,

Toyota-cho

City of Mailing Address::

Toyota-shi

State or Province of Mailing Address:: Aichi-ken

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Initial 03/26/04

Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	471-8571
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Seiji
Middle Name::	
Family Name::	KAWAKAMI
Name Suffix::	
City of Residence::	Susono-shi
State or Province of Residence::	Shizuoka-ken
Country of Residence:	Japan
Street of Mailing Address::	c/o TOYOTA JIDOSHA KABUSHIKI KAISHA, 1, Toyota-cho
City of Mailing Address::	Toyota-shi
State or Province of Mailing Address::	Aichi-ken
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	471-8571
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity

Given Name::

Katsuhiko

Middle Name::	
Family Name::	IWAZAKI
Name Suffix::	
City of Residence::	Suntou-gun
State or Province of Residence::	Shizuoka-ku
Country of Residence:	Japan
Street of Mailing Address::	c/o TOYOTA JIDOSHA KABUSHIKI KAISHA, 1, Toyota-cho
City of Mailing Address::	Toyota-shi
State or Province of Mailing Address::	Aichi-ken
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	471-8571
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Horoaki
Middle Name::	
Family Name::	KATAOKA
Name Suffix::	
City of Residence::	Susono-shi
State or Province of Residence::	Shizuoka-ken
Country of Residence::	Japan
Street of Mailing Address::	c/o TOYOTA JIDOSHA KABUSHIKI KAISHA, 1,
, Pa	age # 9 Initial 03/26/04

Toyota-cho

City of Mailing Address:: Toyota-shi

State or Province of Mailing Address:: Aichi-ken

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing

Address:: 471-8571

### **Correspondence Information**

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

# Representative Information

Representative Customer Number:: 21839

## **Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing

Date::

## **Foreign Priority Information**

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Country:: Application Number:: Filing Date:: Priority

Claimed::

Japan 2003-088649 03/27/03 Yes

### **Assignee Information**

Assignee Name:: AISIN SEIKI KABUSHIKI KAISHA

Street of Mailing Address:: 1, Asahi-machi 2-chome

City of Mailing Address:: Kariya-shi

State or Province of Mailing Address:: Aichi-ken

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing

Address:: 448-8650